KRS 205.8465 provides: the identity of any person reporting Medicaid Fraud shall be considered confidential.

If the report is made in good faith, the reporting person will not be liable in any civil or criminal action based on the report.

No employer may discharge, discriminate or retaliate against a person who reports fraud in good faith, or who testifies or is about to testify about the fraud.

If an employer fires, discriminates or retaliates against a person reporting fraud, the reporting person may sue the employer in court for actual damages, costs and attorneys fees.



>> AG.KY.GOV/Abuse

Any person who knows or has reasonable cause to believe that Medicaid provider fraud has occurred should report that information to the Attorney General's toll-free tipline at 1-877-ABUSE TIP (1-877-228-7384) or report online at AG.KY.GOV/Abuse.



Medicaid Fraud & Abuse Control Division Office of the Attorney General 1024 Capital Center Drive Frankfort, KY 40601 (502) 696-5405 (877) 228-7384

With the increasing concern over the rising cost of health care, it becomes even more important to identify and prosecute those persons who are responsible for fraud in the delivery of health care services.

Conrtol Division Abuse 8 Medicaid Frand

To report Medicaid Provider Fraud, call the AG's toll-free tip line: (877) ABUSE TIP

Fraudulent Medicaid Provider Billing Tip Line

Report suspected fraudulent activity to:

1-877-ABUSE TIP

1-877-228-7384 or online at AG.KY.GOV/Abuse



OFFICE OF THE ATTORNEY GENERAL

Gregory D. Stumbo
Attorney General

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Fraudulent Medicaid Billing (877) ABUSE TIP



An important goal of the Attorney General's Medicaid Fraud and Abuse Control Division is to ensure the financial integrity of the Kentucky Medical Assistance Program. Achievement of this goal is realized through the investigation and prosecution of healthcare providers who fraudulently bill or abuse the Medicaid system.

The Attorney General's Medicaid Fraud Division investigates Medicaid "provider" fraud.

A provider is any individual or business that supplies health care goods and services to Medicaid recipients.

Providers can be medical doctors, dentists, hospitals, nursing homes, pharmacies, durable medical equipment sellers, ambulance companies, taxis, or anyone else who bills the Kentucky Medical Assistance

Program for health care goods and services provided to a Medicaid recipient.

A provider commits fraud by submitting false health care claims in order to obtain improper payment for Medicaid services. The end result is an increase in the cost to the Medicaid program that is passed along to you, the taxpayer.

Report suspected fraudulent activity to 1-877-ABUSE TIP (1-877-228-7384)or report online at AG.KY.GOV/Abuse.

Examples of Fraud

- >> Billing for medical services not actually performed
- >> Billing for a more expensive service than was actually rendered
- >> Billing for several services that should be combined into one billing
- >> Billing twice for the same medical service
- >> Dispensing generic drugs and billing for brand-name drugs
- >> Bribery

- » Kickbacks: giving or accepting something in return for medical services
- >> Providing unnecessary services
- >> False cost reports
- » Billing for ambulance runs when no medical service is provided
- >> Multiple passengers in an ambulance and separate billings submitted for each passenger



The Office of the Attorney General investigates Medicaid "provider" fraud. Intentional Medicaid fraud, in any form, is a crime.